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TO:	PHONE #:	FAX #:
United States Patent and Trademark Office Examiner: Teresa Wessendorf Art Unit: 1645	(703) 308-1202	(703) 872-9306

**From :** Barry S. Wilson**Date :** December 16, 2004**Client/Matter No :** 068904-0507**User ID No :** 3067**MESSAGE:****Re:** U.S. Patent Application No. 10/783,950**Our Ref.:** EPI3009 (068904-0507)**Attached please find:**

- Transmittal (2 pgs.);
- Response to Restriction and Preliminary Amendment (8 pgs.).
- Authorization to charge Deposit Acct. No. 50-0872 any fees due.

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DEC 16 2004

Atty. Dkt. No. 068904-0507

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Hiatt et al.

Title: IMMUNOGLOBULIN BINDING  
PROTEIN ARRAYS IN  
EUKARYOTIC CELLS

Appl. No.: 10/783,950

Filing Date: 2/19/2004

Examiner: Teresa Wessendorf

Art Unit: 1645

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b>	
I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.	
<i>Germaine Sarda</i>	Germaine Sarda
	(Printed Name)
<i>Germaine Sarda</i>	(Signature)
December 16, 2004	(Date of Deposit)

**TRANSMITTAL**Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith are the following:

☒ [ X ] Response to Restriction and Preliminary Amendment (8 Pages).☒ [ X ] The fee required for additional claims is calculated below:

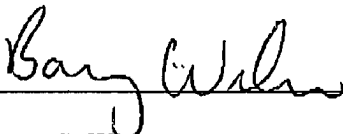
	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	41	-	= 0	x \$50.00 =	\$0.00
Independent Claims:	2	- 7	= 0	x \$200.00 =	\$0.00
First presentation of any Multiple Dependent Claims:			+ \$360.00 =		\$0.00
CLAIMS FEE TOTAL =					\$0.00

Atty. Dkt. No. 068904-0507

[ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date December 16, 2004By 

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Barry S. Wilson  
Attorney for Applicant  
Registration No. 39,431

DEC 16 2004

Atty. Dkt. No. 068904-0501

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**Applicant:** Hiatt et al.  
**Title:** IMMUNOGLOBULIN BINDING  
PROTEIN ARRAYS IN  
EUKARYOTIC CELLS  
**Appl. No.:** 10/783,950  
**Filing Date:** 02/19/2004  
**Examiner:** Wessendorf, Teresa D.  
**Art Unit:** 1639

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b> I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.  <u>Germaine Sarda</u> (Printed Name)  <u>Germaine Sarda</u> (Signature)  <u>December 16, 2004</u> (Date of Deposit)
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**RESPONSE TO RESTRICTION AND PRELIMINARY AMENDMENT**

Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

This communication is responsive to the Restriction Requirement mailed  
November 16, 2004.

**Amendments to the Claims** are reflected in the listing of claims which begins  
on page 2 of this document.

**Remarks/Arguments** begin on page 8 of this document.